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UTILITY PATENT APPLICATION **TRANSMITTAL**

150-153 Attorney Docket No. Anders Hanson First Inventor Safety Knife and Pouch Title Express Mail Label No.

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | | | Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450 | | | | | 22022 |
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| (Submit Applica See 37 Specific (preferre - Descri - Cross - Statem - Refere or a co - Backg - Brief S - Brief D - Detaile - Claim(- Abstra | nt claims small e CFR 1.27. cation ad arrangement set ptive title of the inverse Reference to Relate the the transparence is imputer program list round of the Inverse description of the Drad Description (s) cct of the Disclosure | inflicate for fee processing) Intity status. [Total Pages 14] Inforth below) Intition Intito In | 8. Nucle (if app a. L b. | computer Progretide and/or A dicable, all nec Specification i. CD-ii. Pap Statemer CCOMPAN Assignment F 37 CFR 3.73(| ram (Appendimino Acid Seessary) Readable Fortion Sequence ROM or CD-leer ats verifying in YING APP Papers (covertib) Statement | e Listing on: dentity of about the control of th | or nission or ve copies PARTS ument(s)) ower of | |
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| Custon | ner Number: | | | OR | Corresp | ondence add | ress below | |
| Name | Steven S. Payne |) | _ | | | | | _ |
| Address | 8027 ILIFF Drive | 9 | | | | | | _ |
| City | Dunn Loring | | State VA | | | Zip Code | 22027 | _ |
| Country | USA | | | | | Fax | 703-698-1455 | |
| Name (Print/Ty | pe) Steven S. F | Pavne | Registrati | on No. (Attorn | ey/Agent) 3 | 5,316 | - | |
| Signature | 1 | - S. Payne | | | | Date 03/3 | 1/2004 | <u>-</u> |
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This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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| ### Application Number Filing Date Application Number Filing Date | FEE TRANSMITTA | 1 | Complete if Known | | | | | | | | |
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| First Named Inventor Anders Hanson Examiner Name Anders Hanson Examiner Name Anti-previously patient claims small entity status. See 37 CFR 1.27 Art Unit Anti-previously patient claims small entity status. See 37 CFR 1.27 Art Unit Anti-previously patient claims small entity status. See 37 CFR 1.27 Art Unit Anti-previously patient | FEE IRANSIMILIA | L | Application Number | | | | | | | | |
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| Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (s) 856.00 METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued) | | | First Named Inventor Anders | | | or Anders I | Hanson | | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 856.00 Attorney Docket No. 150-153 | | | | | | | | | | | |
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| SUBMITTED BY Name (Print/Type) Steven S. Payne Registration No. (Attorney/Agent) 703-698-1946 Registration No. (Attorney/Agent) | | ¹Re | educed by | y Basic F | Filing F | ee Paid S | UBTOTAL | (3) (\$) 0.00 | | | |
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